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Bib Data Sheet

CONFIRMATION NO. 8716

<b>SERIAL NUMBER</b> 09/993,153	<b>FILING DATE</b> 11/06/2001 <b>RULE</b>	<b>CLASS</b> 705	<b>GROUP ART UNIT</b> 2161 3626	<b>ATTORNEY DOCKET NO.</b> 10942-011001
<b>APPLICANTS</b> John C.R. Hele, Paget, BERMUDA; Christopher Serflek, Paget, BERMUDA;				
<b>** CONTINUING DATA *****</b> THIS APPLN CLAIMS BENEFIT OF 60/246,260 11/06/2000 <i>OK 7P</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>NONE 7P</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED.. SMALL ENTITY **</b> ** 03/18/2002				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>NP</i> Initials <i>NP</i>	<b>STATE OR COUNTRY</b> BERMUDA	<b>SHEETS DRAWING</b> 13	<b>TOTAL CLAIMS</b> 24
				<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> DENIS G. MALONEY Fish & Richardson P.C. 225 Franklin Street Boston, MA 02110-2804				
<b>TITLE</b> Automated insurance policy application				
<b>FILING FEE RECEIVED</b> 471	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	